

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

HCR MANOR CARE PAC

ADDRESS (number and street)

333 NORTH SUMMIT STREET

16TH FLOOR

☐ Check if different than previously reported. (ACC)

TOLEDO

OH

43604

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00260141

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

OH

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

10

18

2012

through

M M M / D D D / Y Y Y Y Y Y

11

26

2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brad Bury

Signature of Treasurer

Brad Bury

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

11

28

2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

HCR MANOR CARE PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 18 2012 To: M M / D D / Y Y Y Y Y Y
11 26 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		17327.88
(b) Cash on Hand at Beginning of Reporting Period.....	2321.93	
(c) Total Receipts (from Line 19)	16364.08	186485.57
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	18686.01	203813.45
7. Total Disbursements (from Line 31)	2005.00	187132.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	16681.01	16681.01
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

HCR MANOR CARE PAC

Report Covering the Period:

From:

10

18

2012

To:

11

26

2012

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

15235.96

152059.89

(ii) Unitemized

1127.94

34419.61

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

16363.90

186479.50

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

16363.90

186479.50

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.18

6.07

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

16364.08

186485.57

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

16364.08

186485.57

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5.00	332.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5.00	332.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	148500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	2000.00	38300.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2005.00	187132.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2005.00	187132.44

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16363.90	186479.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16363.90	186479.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	5.00	332.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	5.00	332.44

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Charlean Adams

Mailing Address 219 Evergreen Ln

City

Twin Lakes

State

WI

Zip Code

53181

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.55

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36308

Amount of Each Receipt this Period

66.30

Full Name (Last, First, Middle Initial)

B. Kelly R Adler

Mailing Address 14929 Sandstone Place

City

Grand Haven

State

MI

Zip Code

49417

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.98

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36309

Amount of Each Receipt this Period

66.92

Full Name (Last, First, Middle Initial)

C. Larry M Allen

Mailing Address P.O. Box 916

City

Greenwood

State

IN

Zip Code

46142

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36310

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

153.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Martin D Allen

Mailing Address 7151 Whispering Oak

City
Sylvania

State
OH

Zip Code
43560

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare Inc.

Occupation
AVP / Dir Internal Aud & Risk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4230.76

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36229

Amount of Each Receipt this Period

576.93

Contribution

Full Name (Last, First, Middle Initial)

B. Jeffrey R Amann

Mailing Address 5100 Newton Ave. South

City
Minneapolis

State
MN

Zip Code
55419

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare

Occupation
Regional Director of Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.36

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36240

Amount of Each Receipt this Period

190.38

Full Name (Last, First, Middle Initial)

C. Sandy K Annesser

Mailing Address 808 Continental

City
Waterville

State
OH

Zip Code
43566

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare, Inc.

Occupation
CBO Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36241

Amount of Each Receipt this Period

57.69

SUBTOTAL of Receipts This Page (optional)..... ►

825.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Michael Armstrong

Mailing Address 115 N. Remington Rd.

City State Zip Code
 Bexley OH 43209

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR ManorCare Inc.

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36311

Amount of Each Receipt this Period

23.08

Full Name (Last, First, Middle Initial)

B. Nancy Ayers

Mailing Address 5184 N Quail Crest Dr

City State Zip Code
 Grand Rapids MI 49546

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR Manor Care

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.71

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36312

Amount of Each Receipt this Period

64.89

Full Name (Last, First, Middle Initial)

C. Terri Ballesteros

Mailing Address 4230 Durado Court

City State Zip Code
 Placerville CA 95667

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR Manor Care, Inc.

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36313

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

107.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Paul J Barber

Mailing Address 6240 N. Broadway

City

Freeport

State

MI

Zip Code

49325

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.89

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36314

Amount of Each Receipt this Period

111.51

Full Name (Last, First, Middle Initial)

B. Ms Tammy Barker

Mailing Address 4521 Sutton Rd

City

Britton

State

MI

Zip Code

49229

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, LLC.

Occupation

AVP - Quality Support Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1290.36

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36242

Amount of Each Receipt this Period

161.55

Full Name (Last, First, Middle Initial)

C. Susan L. Barnosky

Mailing Address 3243 Arbor Lane

City

Hamilton

State

MI

Zip Code

49419

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36315

Amount of Each Receipt this Period

114.00

SUBTOTAL of Receipts This Page (optional)..... ►

387.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. L Jennifer Baron

Mailing Address 557 Jefferson St.

City
Pittsburgh

State Zip Code
PA 15237

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR Manor Care, Inc

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36316

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Joseph Barrick

Mailing Address 448 Woodcrest Drive

City
Mechanicsburg

State Zip Code
PA 17050

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR Manor Care, Inc.

Occupation
Administrator - York South

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.89

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36317

Amount of Each Receipt this Period

84.54

Full Name (Last, First, Middle Initial)

C. Kimberley K Bassett

Mailing Address 208 E. Scott

City
Tuscola

State Zip Code
IL 61953

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare

Occupation
Director of Quality Improvement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.95

Date of Receipt

10 / 24 / 2012

Transaction ID : SA11AI.36243

Amount of Each Receipt this Period

43.93

SUBTOTAL of Receipts This Page (optional)..... ►

158.47

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Lynne M Bauerschmidt

Mailing Address 7060 Middlebury

City

Lambertville

State

MI

Zip Code

48144

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Internal Training Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36244

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. Ms Julie Beckert

Mailing Address 3911 Buell

City

Toledo

State

OH

Zip Code

43613

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Director of Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1380.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36245

Amount of Each Receipt this Period

180.00

Full Name (Last, First, Middle Initial)

C. James R Bolton

Mailing Address 2209 Bayward Blvd

City

Wilmington

State

DE

Zip Code

19802

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.75

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36320

Amount of Each Receipt this Period

55.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Lori Bott

Mailing Address 558 Grass Lake Road

City

Coldwater

State

MI

Zip Code

49036

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR.ManorCare, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36321

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Michelle Boyle-Haughney

Mailing Address 1008 Sparrow Way

City

Breinsville

State

PA

Zip Code

18031

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.56

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36322

Amount of Each Receipt this Period

45.57

Full Name (Last, First, Middle Initial)

c. Cheryl Q Bray

Mailing Address N 2299 Valley View Rd

City

Norway

State

MI

Zip Code

49870

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36323

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.57

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. David Burke

Mailing Address 425 Kingwood Rd

City

Linthicum Heights

State

MD

Zip Code

21090

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.48

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36246

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Charlotte Butts Price Leonard

Mailing Address 911 Fieldstone Way

City

West Palm Beach

State

FL

Zip Code

33413

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.77

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36324

Amount of Each Receipt this Period

88.47

Full Name (Last, First, Middle Initial)

c. Charlie Byrne

Mailing Address 4685 Rio Poco Ct

City

Naples

State

FL

Zip Code

34109

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR. Manor Care, Inc

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.45

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36247

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

358.47

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Shirley D Cabildo

Mailing Address 38 Bentley Court

City

Bedminster

State

NJ

Zip Code

07921

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Administrator

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

536.91

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36325

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

B. Javier Cavero

Mailing Address 3077 N. Oakland Forest Dr. #202

City

Oakland Park

State

FL

Zip Code

33309

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Administrator

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

525.78

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36328

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Mr. William Chenevert

Mailing Address 2018 N. Rosemary

City

Tucson

State

AZ

Zip Code

85716

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare, Inc.

Occupation

Regional Director of Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

11 / 21 / 2012

Transaction ID : SA11AI.36248

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

289.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Karen R Clark

Mailing Address 1129 West Hunter

City

Nevada

State

MO

Zip Code

64772

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36332

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Johanna Crowder

Mailing Address 31524 Delaware

City

Livonia

State

MI

Zip Code

48150

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR. Manor Care, Inc

Occupation

Manager of Market Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

951.50

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36251

Amount of Each Receipt this Period

105.00

Full Name (Last, First, Middle Initial)

C. Ms Deborah Csaszar

Mailing Address 3715 Spear St.

City

Bethlehem

State

PA

Zip Code

18020

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Managed Care Consultant - Eastern

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36334

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. David K Donin

Mailing Address 11608 Everglade Court

City

North Potomac

State

MD

Zip Code

20878

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.07

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36339

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

B. Linda J Emmett

Mailing Address 10408 Meadowlark Ct. East

City

Bonney Lake

State

WA

Zip Code

98391

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Regional Director of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36252

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Lisa Evans

Mailing Address 24013 22nd Ave West

City

Bothell

State

WA

Zip Code

98021

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36341

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

208.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. R Michael Ferguson

Mailing Address 2450 Underhill Rd

City

Toledo

State

OH

Zip Code

43615

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

VP & Dir of Purchasing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3494.76

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36230

Amount of Each Receipt this Period

576.00

Contribution

Full Name (Last, First, Middle Initial)

B. Suzanne L Fisher

Mailing Address 1504 Old Bernville Road

City

Leesport

State

PA

Zip Code

19533

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Admin Director of Nursing Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36343

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Laura L Flannigan

Mailing Address 1700 Argonne Dr.

City

Concord

State

CA

Zip Code

94518

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.41

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36344

Amount of Each Receipt this Period

35.77

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

641.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Joyce Fox

Mailing Address 37107 Sugar Mill Way

City
Selbyville

State Zip Code
DE 19975

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36346

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Joey Frengel

Mailing Address 428 Bryant Dr

City
Pittsburgh

State Zip Code
PA 15235

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36348

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. George Frill

Mailing Address 2006 Hale Ct

City
Wyomiseing

State Zip Code
PA 19610

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator - Laureldale

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.16

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36349

Amount of Each Receipt this Period

72.96

SUBTOTAL of Receipts This Page (optional)..... ►

112.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Pamela L Fuess

Mailing Address 6590 Spring Meadows Dr.

City State Zip Code
 Greenacres FL 33413

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR ManorCare Inc.

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36350

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. John F Gallick

Mailing Address 392 Castle Crest Road

City State Zip Code
 Alamo CA 94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR ManorCare Inc.

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36253

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Ms. Sally Gates

Mailing Address 2011 20th Lane

City State Zip Code
 Palm Beach Gardens FL 33418

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR ManorCare, Inc.

Occupation
 Regional Director of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36351

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

180.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 56
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial) A. Mr. Leonard Grabijas			Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.36254	
Mailing Address 2682 Ravine Side North			Amount of Each Receipt this Period 173.07	
City Howell	State MI	Zip Code 48843		
FEC ID number of contributing federal political committee. C				
Name of Employer HCR Manor Care, LLC.		Occupation VP Sales & Mktg		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1119.18		

Full Name (Last, First, Middle Initial) B. Ruth G Graziano			Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.36255	
Mailing Address 503 Elk Mills Road			Amount of Each Receipt this Period 184.62	
City Oxford	State PA	Zip Code 19363		
FEC ID number of contributing federal political committee. C				
Name of Employer HCR ManorCare Inc.		Occupation Regional Director of Operation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1746.18		

Full Name (Last, First, Middle Initial) C. Andrew Green			Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.36355	
Mailing Address 3808 Parkridge Circle			Amount of Each Receipt this Period 50.76	
City Sarasota	State FL	Zip Code 34243		
FEC ID number of contributing federal political committee. C				
Name of Employer HCR ManorCare		Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.70		

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

408.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Ms Lisa Griesmer

Mailing Address 12125 Summerwood Dr

City State Zip Code
 Concord Twp OH 44077

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR Manor Care, LLC.

Occupation
 Assistant Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36356

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Jill L Hale

Mailing Address 366 Burlington Rd

City State Zip Code
 Jackson OH 45640

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR Manor Care, Inc.

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36359

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Ms Gayla M Haley

Mailing Address 239 County Rd

City State Zip Code
 Tenaha TX 75974

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR ManorCare, LLC

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

648.64

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36360

Amount of Each Receipt this Period

54.40

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

159.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Karen Harris

Mailing Address 8250 SW 8th St

City

North Lauderdale

State

FL

Zip Code

33068

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Assistant Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.71

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36258

Amount of Each Receipt this Period

87.33

Full Name (Last, First, Middle Initial)

B. Mr. Alan Hash

Mailing Address 9496 South Dunbar Circle

City

South Jordan

State

UT

Zip Code

84095

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Regional Director - Western Division 5

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.42

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36259

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Deborah Heath

Mailing Address 6752 Sheppard Road

City

Adrian

State

MI

Zip Code

49221

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Admin Dir Of Nursing Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36361

Amount of Each Receipt this Period

51.93

SUBTOTAL of Receipts This Page (optional)..... ►

439.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Kevin C Henricks

Mailing Address 23636 W. Chicago St. Unit 102

City
Plainfield

State
IL

Zip Code
60544

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare Inc.

Occupation
Regional Director of Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36260

Amount of Each Receipt this Period

123.00

Full Name (Last, First, Middle Initial)

B. Timothy M Hock

Mailing Address 8054 Tillicum Grove North

City
Rockford

State
MI

Zip Code
49341

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare Inc.

Occupation
Regional Director of Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.73

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36262

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Rodger J Hogan

Mailing Address 101 Mercury Way

City
Pleasant Hill

State
CA

Zip Code
94523

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR Manor Care Inc

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36364

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

316.07

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Rebecca Hollingsead

Mailing Address 558 N Hillcrest

City

Decatur

State

IL

Zip Code

62522

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care

Occupation

Director Clinical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

974.47

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36263

Amount of Each Receipt this Period

121.80

Full Name (Last, First, Middle Initial)

B. Sharon R Holmes

Mailing Address 3207 N. 27th St.

City

Tacoma

State

WA

Zip Code

98407

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator in Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36366

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Kathryn Hoops

Mailing Address 24708 McCutchenville Road

City

Perrysburg

State

OH

Zip Code

43551

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare, Inc.

Occupation

VP of Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3150.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36232

Amount of Each Receipt this Period

630.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

791.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Ms Kate Gieroczynski Huck

Mailing Address 65 Washington St

City

Topton

State

PA

Zip Code

19562

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare, LLC

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.10

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36368

Amount of Each Receipt this Period

64.89

Full Name (Last, First, Middle Initial)

B. John M Hupp

Mailing Address 2102 Braken Ave

City

Wilmington

State

DE

Zip Code

19808

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36369

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Samantha Jones

Mailing Address 115 Airport Ave. East Apt. 2

City

Venice

State

FL

Zip Code

34285

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36372

Amount of Each Receipt this Period

52.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

146.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Robert G Julius

Mailing Address 3321 Pelham Rd

City

Ottawa Hills

State

OH

Zip Code

43606

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Mgr. Business Office Process Dev.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.91

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36294

Amount of Each Receipt this Period

132.69

Full Name (Last, First, Middle Initial)

B. Lisa J. Jurski

Mailing Address 1934 Delence Street

City

Toledo

State

OH

Zip Code

43605

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare, Inc.

Occupation

Director - Workers Comp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36295

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

C. Linda Karling-Lott

Mailing Address 4361 Conrwallis Ct

City

Marietta

State

GA

Zip Code

30068

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.50

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36375

Amount of Each Receipt this Period

68.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

290.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 56
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Mrs. Kathy Karr

Mailing Address 11977 Babbling Brook Rd

City State Zip Code
 Noblesville IN 46060

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care Inc.

Occupation

Senior Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36376

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Rodney S Keefer

Mailing Address 15126 Ridgeview Dr

City State Zip Code
 Clive IA 50325

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36379

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Dan Kight

Mailing Address 2013 Orchard Rd

City State Zip Code
 Toledo OH 43606

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Mgr^ Pharmacy Ops Sprt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36233

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

230.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Vivian Kiraly

Mailing Address 4254 Waterbend Drive West

City State Zip Code
 Maumee OH 43537

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36381

Amount of Each Receipt this Period

82.50

Full Name (Last, First, Middle Initial)

B. Kathryn C Kondolf-Harmer

Mailing Address 6421 Crews Lake Hills Loop West

City State Zip Code
 Lakeland FL 33813

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36385

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Mark Kruzel

Mailing Address 26215 Black Oak Ct

City State Zip Code
 Perrysburg OH 43551

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Accounting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36296

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Betty Kutner

Mailing Address 3006 Wild Run Road

City

Pennsburg

State

PA

Zip Code

18073

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator - Easton

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36388

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Amy LaFleur

Mailing Address 207 S. Ann Arbor St.

City

Saline

State

MI

Zip Code

48176

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR. Manor Care, Inc

Occupation

Regional Director of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.76

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.36264

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

C. Ryan Locy

Mailing Address 1425 Cody Parkway Apt. D

City

Platteville

State

WI

Zip Code

53818

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.96

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36390

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

88.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Mr. Richard Louwaert

Mailing Address PO Box 152

City

Decatur

State

MI

Zip Code

49045

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, LLC.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36391

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. Diane Lube

Mailing Address 1830 Essex Pl

City

Downers Grove

State

IL

Zip Code

60516

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36392

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Lee Mahar

Mailing Address 1125 Windmill Way North

City

Avon

State

OH

Zip Code

44011

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Admissions Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.43

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36395

Amount of Each Receipt this Period

31.17

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Linda Mason

Mailing Address 3126 Diehn Ave

City
Davenport

State Zip Code
IA 52802

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR Manor Care, Inc.

Occupation
Director of Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36398

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Nancy Mason

Mailing Address 56 Holden Dr

City
Martinsburg

State Zip Code
WV 25401

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR. Manor Care, Inc

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36399

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Frederick Massoll

Mailing Address 2031 Raby Rd

City
Haslett

State Zip Code
MI 48840

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR. Manor Care, Inc

Occupation
Administartor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36400

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Frances Mastel

Mailing Address 1807 Derian Drive

City

Aberdeen

State

SD

Zip Code

57401

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36401

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. Ms. Janet Mastrangelo (Howells)

Mailing Address 266 Crossing Creek North

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare, Inc.

Occupation

Assistant Vice President of Rehab

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1309.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36265

Amount of Each Receipt this Period

231.00

Full Name (Last, First, Middle Initial)

C. Jill Matelan

Mailing Address 312 N. Franklin St

City

Fleetwood

State

PA

Zip Code

19522

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc

Occupation

Administrator - Sinking Spring

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.96

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36402

Amount of Each Receipt this Period

85.62

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

376.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Patricia McCormick

Mailing Address 113 Holly Lane

City

Perrysburg

State

OH

Zip Code

43551

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc

Occupation

Legal Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36298

Amount of Each Receipt this Period

108.00

Full Name (Last, First, Middle Initial)

B. Laurie A McCullough-Benner

Mailing Address 371 Colonial Lane

City

Dayton

State

OH

Zip Code

45429

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Regional Director of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36266

Amount of Each Receipt this Period

186.00

Full Name (Last, First, Middle Initial)

C. Nicole McMonigle

Mailing Address 739 N Oakland St #5

City

Arlington

State

VA

Zip Code

22203

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.82

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36404

Amount of Each Receipt this Period

26.92

SUBTOTAL of Receipts This Page (optional)..... ►

320.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Murry Mercier

Mailing Address 7110 Oak Bluff Lane

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

VP - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3461.43

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36234

Amount of Each Receipt this Period

576.90

Full Name (Last, First, Middle Initial)

B. Stacy H Mesaros

Mailing Address 1304 234th Pl

City

Des Moines

State

WA

Zip Code

98198

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.28

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36405

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Daniel J Mikus

Mailing Address 809 Oak Avenue

City

Linwood

State

NJ

Zip Code

08221

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.94

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36406

Amount of Each Receipt this Period

35.46

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

642.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Debra Miles

Mailing Address 7448 Hickory Valley Drive

City State Zip Code
Maumee OH 43537

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare Inc.

Occupation
AVP & Director of Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36235

Amount of Each Receipt this Period

135.00

Full Name (Last, First, Middle Initial)

B. Scott Miller

Mailing Address 198 Old Mill Drive

City State Zip Code
Langhorne PA 19047

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare Inc.

Occupation
Sr Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1242.15

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36268

Amount of Each Receipt this Period

156.00

Full Name (Last, First, Middle Initial)

C. Mr. Tom Myers

Mailing Address 24927 Prairie Crossing

City State Zip Code
Perrysburg OH 43551

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR Manor Care, Inc.

Occupation
Director of Ops Support - Central

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36270

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

366.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Ms Joylin Nation

Mailing Address 15985 Voyageurs Place

City	State	Zip Code
West Palm Beach	FL	33414

FEC ID number of contributing federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Senior Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.36271

Amount of Each Receipt this Period

115.38

Full Name (Last, First, Middle Initial)

B. Kristin R Nesser

Mailing Address 3117 Yale Blvd.

City	State	Zip Code
St. Charles	MT	63301

FEC ID number of contributing federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.36412

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Linda Neumann

Mailing Address 28 Roslyn Road

City	State	Zip Code
Grosse Pointe Shor	MI	48236

FEC ID number of contributing federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Regional Director of Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2365.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.36272

Amount of Each Receipt this Period

403.86

SUBTOTAL of Receipts This Page (optional)..... ►

579.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Stacy Nies

Mailing Address 178 Pheasant Drive

City

Fond du Lac

State

WI

Zip Code

54935

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36414

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Janis Nowak

Mailing Address 1221 N. Chilson

City

Bay City

State

MI

Zip Code

48706

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.64

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36415

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

C. Nashika T O'Gilvie

Mailing Address 1823 N. Congress Ave

City

West Palm Beach

State

FL

Zip Code

33401

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.18

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36416

Amount of Each Receipt this Period

73.11

SUBTOTAL of Receipts This Page (optional)..... ►

99.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 56
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial) A. Eric O'Neill			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>11 / 26 / 2012</div> </div>	
Mailing Address 4009 East Braeburn Dr			Transaction ID : SA11AI.36274	
City Appleton	State WI	Zip Code 54913	Amount of Each Receipt this Period <div> <div>132.69</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer HCR ManorCare		Occupation Regional Director of Operation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>1061.52</div> </div>		

Full Name (Last, First, Middle Initial) B. Ms Olivia O'Nest			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>11 / 26 / 2012</div> </div>	
Mailing Address 191 Foxhill Ln			Transaction ID : SA11AI.36417	
City Perrysburg	State OH	Zip Code 43551	Amount of Each Receipt this Period <div> <div>30.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer HCR Manor Care, LLC.		Occupation DDOS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>273.46</div> </div>		

Full Name (Last, First, Middle Initial) c. Ms Leslie Ohm			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>11 / 26 / 2012</div> </div>	
Mailing Address 12331 South 71st Avenue			Transaction ID : SA11AI.36273	
City Palos Heights	State IL	Zip Code 60463	Amount of Each Receipt this Period <div> <div>174.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer HCR.ManorCare, Inc.		Occupation Regional Director of Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>1362.00</div> </div>		

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

336.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Ms. Annette Orłowski

Mailing Address 2664 Heytman Dr

City

Lansing

State

IA

Zip Code

52151

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR.ManorCare, Inc.

Occupation

Director, Clinical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.66

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36418

Amount of Each Receipt this Period

186.00

Full Name (Last, First, Middle Initial)

B. Ann E Otley

Mailing Address 333 W Wooster St

City

Bowling Green

State

OH

Zip Code

43402

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Director of Corporate Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36301

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Richard A Parr II

Mailing Address 2253 Gray Fox Court

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

VP - General Counsel & Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36236

Amount of Each Receipt this Period

576.00

SUBTOTAL of Receipts This Page (optional)..... ►

822.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Tracy L Peterson

Mailing Address 6865 Poplar Drive

City

Ypsilanti

State

MI

Zip Code

48197

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.85

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36420

Amount of Each Receipt this Period

63.15

Full Name (Last, First, Middle Initial)

B. Alyssa N Pischel

Mailing Address 55 S. Bear Lake Rd.

City

N. Muskegon

State

MI

Zip Code

49445

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.15

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36421

Amount of Each Receipt this Period

65.85

Full Name (Last, First, Middle Initial)

C. Clifton J Porter II

Mailing Address 3929 Azalea Circle

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

AVP^ Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2192.40

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36275

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

429.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Douglas M Postlewait

Mailing Address 656 Wilson Ave SW

City

Grand Rapids

State

MI

Zip Code

49534

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.42

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36422

Amount of Each Receipt this Period

111.78

Full Name (Last, First, Middle Initial)

B. Mr. Stewart Reed

Mailing Address 402 Wesley Dr

City

Salisbury

State

NC

Zip Code

28146

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, LLC.

Occupation

RDO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.08

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36276

Amount of Each Receipt this Period

114.75

Full Name (Last, First, Middle Initial)

C. Barbara Reigel

Mailing Address 112 Center Street

City

Bridgeport

State

PA

Zip Code

19405

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Mobile ADNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.74

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36423

Amount of Each Receipt this Period

55.23

SUBTOTAL of Receipts This Page (optional)..... ►

281.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 56
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial) A. Margaret A Reitmeyer			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>11 / 26 / 2012</div> </div> Transaction ID : SA11AI.36277		
Mailing Address 13 Gregory Drive					
City	State	Zip Code			
Kenvil	NJ	07847			
FEC ID number of contributing federal political committee.		<div>C</div>			
Name of Employer HCR Manor Care, Inc.		Occupation Regional Director of Operations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>891.78</div>			
Full Name (Last, First, Middle Initial) B. Patricia B Richards			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>11 / 26 / 2012</div> </div> Transaction ID : SA11AI.36302		
Mailing Address P.O. Box 754					
City	State	Zip Code			
Shady Spring	WV	25918			
FEC ID number of contributing federal political committee.		<div>C</div>			
Name of Employer HCR Manor Care, Inc.		Occupation Area Human Resource Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>656.50</div>			
Full Name (Last, First, Middle Initial) C. Damian M Rodgers			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>11 / 26 / 2012</div> </div> Transaction ID : SA11AI.36303		
Mailing Address 4647 Calico Court					
City	State	Zip Code			
Monclova	OH	43542			
FEC ID number of contributing federal political committee.		<div>C</div>			
Name of Employer HCR Manor Care, Inc.		Occupation Legal Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>504.00</div>			
SUBTOTAL of Receipts This Page (optional)..... ▶			<div>341.31</div>		
TOTAL This Period (last page this line number only)..... ▶			<div></div>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Cindy A Rogowski

Mailing Address 6050 Helen

City

Garden City

State

MI

Zip Code

48135

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36427

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. David R Roth

Mailing Address 5257 Bentwood Drive

City

Mason

State

OH

Zip Code

45040

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Director Of Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1167.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36237

Amount of Each Receipt this Period

153.00

Full Name (Last, First, Middle Initial)

C. Mr. Rick Rump

Mailing Address 2423 Heather Glen

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR.ManorCare, Inc.

Occupation

Director of Corporate Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1242.57

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36238

Amount of Each Receipt this Period

170.25

SUBTOTAL of Receipts This Page (optional)..... ►

363.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 56
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Mary Jane Ruppert

Mailing Address 603 North Blackhoof St.

City State Zip Code
 Wapakoneta OH 45895

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Sr Dir 4H Compliance and Edu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

698.44

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36429

Amount of Each Receipt this Period

122.40

Full Name (Last, First, Middle Initial)

B. Angela G Russo

Mailing Address 4950 Cypress Pike Circle
 Unit 101

City State Zip Code
 Virginia Beach VA 23455

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Gen Mgr Central Div 4H

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.36

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36430

Amount of Each Receipt this Period

189.72

Full Name (Last, First, Middle Initial)

C. Deborah Schlosser

Mailing Address 2432 21st Street

City State Zip Code
 Wyandotte MI 48192

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Regional Director of Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.30

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36304

Amount of Each Receipt this Period

101.49

SUBTOTAL of Receipts This Page (optional)..... ►

413.61

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Mr. Mark Schroepfer

Mailing Address 2328 Bonnie Brae

City
Santa Ana

State
CA

Zip Code
92706

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR.ManorCare, Inc.

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36433

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Edward Schuch

Mailing Address 304 Adriana Court

City
Northampton

State
PA

Zip Code
18067

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR Manor Care, Inc.

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.57

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36434

Amount of Each Receipt this Period

81.63

Full Name (Last, First, Middle Initial)

C. James Seiwert

Mailing Address 5 Zachary Circle

City
Waterville

State
OH

Zip Code
43566

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare

Occupation
Business Office Proc Special

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.24

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36305

Amount of Each Receipt this Period

34.62

SUBTOTAL of Receipts This Page (optional)..... ►

166.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Mr. Richard Shook

Mailing Address 8968 Weddel

City
Taylor

State
MI

Zip Code
48180

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR.ManorCare, Inc.

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36436

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Ms Joyce Louise Smith

Mailing Address 3521 Cedar Creek Court

City
Maumee

State
OH

Zip Code
43537

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR.ManorCare, Inc.

Occupation
Vice President, Director Clinical Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2369.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36239

Amount of Each Receipt this Period

324.00

Full Name (Last, First, Middle Initial)

C. David W Snyder Jr

Mailing Address 3117 Terry Dr. SE

City
Cedar Rapids

State
IA

Zip Code
52403

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare Inc.

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36438

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

374.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 56
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Melissa Sorensen

Mailing Address 816 Lake Shore Terrace

City State Zip Code
 Interlachen FL 32148

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Director Clinical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36278

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Jeffrey J Stepanski

Mailing Address 120 Heidi Circle

City State Zip Code
 Carson City NV 89701

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.44

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36441

Amount of Each Receipt this Period

65.18

Full Name (Last, First, Middle Initial)

C. Mr. Alan Stewart

Mailing Address 571 Dorado Dr

City State Zip Code
 Fairborn OH 45324

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, LLC.

Occupation

Employee Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.36306

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

425.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 48 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Jane L Stilwell

Mailing Address 2351 S. Rogers

City
Springfield

State Zip Code
MO 65804

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR Manor Care, Inc.

Occupation
Mobile Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36279

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Anthony J Stinson

Mailing Address 3 Lynnefield Court

City
Medford

State Zip Code
NJ 08055

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare Inc.

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.68

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36443

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Sherri L Stoltzfus

Mailing Address 119 East Manor Dr.

City
Lititz

State Zip Code
PA 17543

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR Manor Care, Inc.

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36444

Amount of Each Receipt this Period

66.63

SUBTOTAL of Receipts This Page (optional)..... ►

246.63

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Colette Storck

Mailing Address 28490 Wynikako Ave

City

Millsboro

State

DE

Zip Code

19966

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, LLC.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36445

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. Ms Denise Summers

Mailing Address 17262 Boca Club Blvd #2404

City

Boca Raton

State

FL

Zip Code

33487

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.72

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36446

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Evelyn Tagudtud

Mailing Address 9177 Sweet Berry Court

City

Jacksonville

State

FL

Zip Code

32256

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Admin Director of Nursing Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.24

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36447

Amount of Each Receipt this Period

37.78

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 50 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Mr. Eric Talbert

Mailing Address 7231 Stonewater Ct

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR Manor Care, Inc.

Occupation

Div. Director of Operations Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36280

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. Aimee Michell Talbot

Mailing Address 6900 Stanfield Rd SE

City

Lacey

State

WA

Zip Code

98503

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Admin Dir Of Nursing Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36448

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Mark Tami

Mailing Address 50 Jordan Dr., Apt. 7

City

Whitehall

State

PA

Zip Code

18052

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Admin Dir Of Nursing Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36449

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Cyndi K Taplin

Mailing Address 5023 W. 59th St

City
Davenport

State Zip Code
IA 52806

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR Manor Care, Inc.

Occupation
Regional Director of Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1727.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36281

Amount of Each Receipt this Period

230.76

Full Name (Last, First, Middle Initial)

B. James Thomas III

Mailing Address 2672 Magnolia Woods

City
Mt. Pleasant

State Zip Code
SC 29464

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare

Occupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.30

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36463

Amount of Each Receipt this Period

80.49

Full Name (Last, First, Middle Initial)

C. Lauren Thomson

Mailing Address 215 Bank St

City
East Greenville

State Zip Code
PA 18041

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCR ManorCare

Occupation
Admin Dir Of Nursing Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.69

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.36451

Amount of Each Receipt this Period

47.31

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

358.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 56
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial) A. Rami Ubaydi			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>11 / 26 / 2012</div> </div>	
Mailing Address 6519 Chatham Circle			Transaction ID : SA11AI.36283	
City Rochester Hills	State MI	Zip Code 48306	Amount of Each Receipt this Period <div> <div>219.27</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer HCR Manor Care, Inc.		Occupation Regional Director of Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>1740.58</div> </div>		

Full Name (Last, First, Middle Initial) B. Susan Ward			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>11 / 26 / 2012</div> </div>	
Mailing Address 12 Arapaho			Transaction ID : SA11AI.36453	
City Shawnee	State OK	Zip Code 74801	Amount of Each Receipt this Period <div> <div>83.64</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer HCR Manor Care, Inc.		Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>669.12</div> </div>		

Full Name (Last, First, Middle Initial) C. Toni Y Williams			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>11 / 26 / 2012</div> </div>	
Mailing Address 141 Boiling Spring Cir			Transaction ID : SA11AI.36455	
City Southern Pines	State NC	Zip Code 28387	Amount of Each Receipt this Period <div> <div>60.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer HCR ManorCare Inc.		Occupation Admin Dir Of Nursing Serv		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>380.00</div> </div>		

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

362.91

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 53 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Benjuiman Young

Mailing Address 7822 NE 24th Ct.

City

Vancouver

State

WA

Zip Code

98665

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.06

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36457

Amount of Each Receipt this Period

60.58

Full Name (Last, First, Middle Initial)

B. Julie A Yoxtheimer

Mailing Address 249 E Pearl St

City

Findlay

State

OH

Zip Code

45840

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Sr Reimbursement Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.00

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36285

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Cynthia M Zalewski

Mailing Address 3845 Drummond Rd

City

Toledo

State

OH

Zip Code

43613

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCR ManorCare Inc.

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1246.14

Date of Receipt

11 / 26 / 2012

Transaction ID : SA11AI.36307

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

308.65

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 54 OF 56

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Daniel A Zawadzki

Mailing Address 18910 Mallard Cove

City State Zip Code
 Middleburg Heights OH 44130

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HCR Manor Care, Inc.

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 26 2012

Transaction ID : SA11AI.36458

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

15235.96

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
HCR MANOR CARE PAC



SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 56

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HCR MANOR CARE PAC

Full Name (Last, First, Middle Initial)

A. Friends of Bill Coley

Mailing Address 8265 Cherry Laurel Drive

City	State	Zip Code
Middletown	OH	45044

Purpose of Disbursement
Campaign Contribution

Candidate Name

Friends of Bill Coley

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2012

Transaction ID : SB29.36228

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MALONEY FOR WEST VIRGINIA

Mailing Address PO BOX 18189

City	State	Zip Code
MORGANTOWN	WV	28507

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2012

Transaction ID : SB29.36227

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

2000.00
